## Fauquier County Department of Community Development 29 Ashby Street, Suite 310 Warrenton, VA 20186 (540) 347-8703 Fax (540) 347-6932 www.fauquiercounty.gov

## REZONING CHECKLIST

Case Number:		
YES	NO	N/A STATE REASON Use separate sheet if necessary
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YES	NO	N/A STATE REASON Use separate sheet if necessary
	YES	YES NO

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## REZONING CHECKLIST

CONCEPT DEVELOPMENT PLAN REQUIREMENTS (Cont.)  See Section 13.202.2 of Zoning Ordinance for more details.	YES	NO	N/A STATE REASON Use separate sheet if necessary
General drainage pattern			
4. Location of open space			
<ol><li>Architectural renderings when required by a proffered condition.</li><li>This requirement may be waived by the Director or his designated agent.</li></ol>			
CERTIFICATION OF APPLICATION SUBMISSION			
I hereby certify that the above stated information is included in the materials. Further, I have included on the plat any conditions requiexception or variance approval, special agreements or covenants.  Engineer or Surveyor	red by proffe	-	
Firm Name	)		
Date			
COUNTY CERTIFICATION OF APPLICATION SUBMISSION			
Accepted Rej	ected	-	
Planner's Signa	ature		
Date			
Revised March	2005		